

Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

February 16, 2016

Hospitech Respiration Ltd c/o Yoram Levy Qsite General Manager Qsite 31 Haavoda St. Binyamina 30500 Israel

Re: K150157

Trade/Device Name: AnapnoGuard 100 Respiratory Guard System

Regulation Number: 21 CFR 868.5750

Regulation Name: Inflatable Tracheal Tube Cuff

Regulatory Class: Class II Product Code: BSK, BTR Dated: December 19, 2015 Received: December 28, 2015

Dear Mr. Levy,

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801; medical device reporting (reporting of medical

device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Tejashri Purohit-Sheth, M.D.

Tejashri Purohit-Sheth, M.D.
Clinical Deputy Director
DAGRID/ODE/CDRH FOR

Erin I. Keith, M.S.
Director
Division of Anesthesiology, General Hospital,
Respiratory, Infection Control and
Dental Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

E10/k) Number (if known)

Form Approved: OMB No. 0910-0120 Expiration Date: January 31, 2017 See PRA Statement below.

o to(k) Number (II known)	
K150157	
Device Name	
AnapnoGuard 100 Respiratory Guard System	
Indications for Use (Describe)	
AnapnoGuard 100 Respiratory Guard System is intended for airway management by oral/nas	sal intubation while providing
continuous endotracheal cuff pressure control using non-invasive measurement and monitorin	
concentration in the subglottic space and evacuation of secretions from above the endotrache	al tube's cuff.
Torrest like (Oaks torresse held)	
Type of Use (Select one or both, as applicable)	
Prescription Use (Part 21 CFR 801 Subpart D)	1 CFR 801 Subpart C)
PLEASE DO NOT WRITE BELOW THIS LINE – CONTINUE ON A SEPARATE	PAGE IF NEEDED.
FOR FDA USE ONLY	
Concurrence of Center for Devices and Radiological Health (CDRH) (Signature)	

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510(K) SUMMARY

AnapnoGuard 100 Respiratory Guard System 510(k) Number K150157

Applicant's Name: Hospitech Respiration Ltd

20 Hamagshimim Street

Kiryat Matalon,

Petach-Tikva, 4934829

Israel

TEL: (972)3-919-1648, FAX: (972)3-919-1647

Contact Person: Yoram Levy, Qsite

31 Haavoda Street

Binyamina, Israel 30500

Tel (972)4-638-8837; Fax (972)4-638-0510

Yoram@qsitemed.com

Trade Name: AnapnoGuard 100 Respiratory Guard System

Summary

Preparation Date: January 15, 2015

Classification:

Classification name: Cuff, tracheal tube, inflatable

Product Code: BSK

Regulation No: 21 CFR 868.5750

Class: II

Panel: Anesthesiology

Device Description:

AnapnoGuard 100 Respiratory Guard System is comprised of the following three main components:

- The AnapnoGuard endotracheal tube (ETT) with inflatable cuff (FDA cleared under K093126).
- The *AnapnoGuard 100 Respiratory Guard System* interconnection harness of tubes, connecting the ETT to the AnapnoGuard 100 control unit
- The *AnapnoGuard 100 Respiratory Guard System* control unit which consists of the following main modules:
- Host computer (PC)
- Microcontroller (MCU)



- **Suction module** (regulator and flow potency meter): including a set of valves and pipes controlling the secretions suction/evacuation from above the ETT cuff.
- **Rinsing module**: Pumps saline to rinse the Suction and Vent/CO₂ lumens.
- **CO₂ analyzer module:** including CO₂ analyzer assembly, pump, valve and flow filter which sucks air from the subglottic space above the ETT cuff into the CO₂ analyzer.
- **Cuff pressure module:** includes two pressure gauges which monitor cuff pressure, a miniature air pump and two valves.
- Pneumatic module: valves, pipes and filters
- **Connectors panel** for connecting the interconnection harness (ETT), vacuum, trap bottle, rinsing fluid and filters.
- Operation buttons panel and navigation wheel
- I/O communication panel
- Display monitor

AnapnoGuard 100 Respiratory Guard System, including its three components monitors leak between the endotracheal tube's cuff and the trachea by measuring the Carbon Dioxide levels in the subglottic area above the cuff through a dedicated lumen in the endotracheal tube. Detection of a high level of Carbon Dioxide is an objective indicator for a leak (improper sealing of the trachea by the endotracheal tube cuff). The system continuously monitors and adjusts the cuff pressure to prevent a leak at minimum possible pressure (all within pressure limits preset by the user).

Preventing a leak reduces the likelihood of aspiration of secretions from the upper airways into the lungs and increases the likelihood for no loss of ventilation and delivery of anesthetic and nebulized drugs into the lungs. Keeping the cuff pressure as low as possible reduces the mechanical pressure of the cuff on the tracheal tissue throughout the intubation period.

The system also performs evacuation of secretions from above the endotracheal tube's cuff through a dedicated lumen at the dorsal side of the endotracheal tube.



Indication for Use:

AnapnoGuard 100 Respiratory Guard System is intended for airway management by oral/nasal intubation while providing continuous endotracheal cuff pressure control using non-invasive measurement and monitoring of carbon dioxide concentration in the subglottic space and evacuation of secretions from above the endotracheal tube's cuff.

Predicate Devices: Substantial equivalence to the following predicate devices is claimed:

Device Name	510k No	Clearance Date
PYTON Cuff Pressure	K092733	Feb 26, 2010
Regulator		
SIMEX subglottic	K141255	September 22, 2014
Aspiration System (suction)		
Hospitech Respiration		
AnapnoGuard Endotracheal	K093126	March 2, 2010
Tube (ETT)		

Reference devices:

Device Name	510k No	Clearance Date
Covidien SealGuard TM Evac	K082520	October 2, 2008
TELEFLEX ISISTM	K091761	October 29, 2009
Mallinckrodt Ty-Care Closed Suction System	K031997	November 25, 2003
SUNMED CuffAlert TM	K081805	Nov 14, 2008
Ohio Push-To-Set	class II	
Intermittent and Continuous	Product Code KDP	
Vacuum Regulators	Regulation No. 21CFR 880.6740	
NS Series Vacuum/Pressure Gauges	K081778	Sep 12, 2008
MicroCap Plus/NPB-75	K024300	Apr 03, 2003
Hamilton Cuff Pressure	K103803	Nov 3, 2011
Regulator (IntelliCuff)		
Boehringer Laboratories	class II	
CASS Regulator Model	Product Code KDP	
3720	Regulation No. 21CFR 880.6740	



Comparison with PYTON Pressure Regulator predicate device

Characteristic	AnapnoGuard 100 Respiratory Guard	PYTON Cuff Pressure
	System (Submitted)	Regulator
		(K092733)
Intended use	AnapnoGuard 100 Respiratory Guard	To measure and regulate
	<i>System</i> is intended for airway	intra-cuff pressures of
	management by oral/nasal intubation	endotracheal
	while providing continuous	supraglottic airways or
	endotracheal cuff pressure control using	tracheostomy tubes.
	non-invasive measurement and	The PYTON is intended
	monitoring of carbon dioxide	for use on patients who are intubated.
	concentration in the subglottic space and evacuation of secretions from	are intubated.
	above the endotracheal tube's cuff.	
Regulatory	II	II
Class		
Product Code ,	BSK	BSK
Regulation	21 CFR 868.5750	21 CFR 868.5750
Number	0 11	4.5
Minimum	0 mmHg	15 mmHg 20 Cm H ₂ O
measured		20 Cm H2O
pressure		
Maximal cuff	33 mmHg (47 cmH2O)	22 mmHg
pressure		30 Cm H ₂ O
Control	±0.1 mmHg (0.13 cmH2O)	±0.73 mmHg
Accuracy		(±1 cmH2O)
•	±0.1 mmHg (0.13 cmH2O)	±0.73 mmHg
Recording Accuracy	=0.1 mming (0.13 cm 120)	(±1 cmH2O)
-	0.2.0	,
Pressure drop Alarm time	0.2 Sec	NA
Pressure rise	0.2 Sec	NA
alarm time		
Power Supply	110 – 220 V with backup battery	110 – 220 V with
rower Supply	110 220 v with backup battery	110 220 V WILII

Comparison for the SIMEX subglottic suction predicate device

Comparison for the SIMEA subgiottic suction predicate device		
	AnapnoGuard 100 Respiratory Guard	K141255
	System (Submitted)	SIMEX subglottic
		Aspiration System
Manufacturer	Hospitech Respiration Ltd.	SIMEX Medizintechnik,
		GmbH
Intended use	AnapnoGuard 100 Respiratory Guard System is intended for airway management by oral/nasal intubation while providing continuous	The SIMEX subglottic Aspiration System models cuff M and cuff S are indicated for vacuum suction, extraction,



	AnapnoGuard 100 Respiratory Guard	K141255
	System (Submitted)	SIMEX subglottic
		Aspiration System
	endotracheal cuff pressure control using non-invasive measurement and monitoring of carbon dioxide concentration in the subglottic space and evacuation of secretions from above the endotracheal tube's cuff.	aspiration and removal of surgical fluids, tissue (including bone), bodily fluids or infectious materials from wounds or from patient's airway or respiratory system, either during surgery or at patient's bed side.
Product Code, Regulation Number	BSK 21 CFR 868.5750	BTA 21 CFR 878.4780
Regulatory Class	II	II
Suction Pressure Range	-20 up to -120 mmHg	-15 to -225 mmHg (-20 to -300 mbar)
Mode of operation	Manual Intermittent	Manual Intermittent:
Closed System	Yes	Yes
Indications for single patient use	No	No
Allows ETT replacement without disconnecting patient from ventilator	Yes	Yes
Manual control of vacuum	Yes	Yes
Patient Population	Adults	Adults and pediatric
Evacuation of secretions from above the endotracheal tube's cuff	yes	Yes
Biocompatibility	All materials that come in contact with the patient body or liquids are	Same



	AnapnoGuard 100 Respiratory Guard System (Submitted)	K141255 SIMEX subglottic Aspiration System
	biocompatible and compliant with ISO 10993-1	
Flow Rate	0 to 15 L/min	8 L/Min

Comparison for the AnapnoGuard ETT

Characteristics	Proposed Hospitech Respiration		
Characteristics	AnapnoGuard 100 Respiratory	AnapnoGuard Endotracheal	
	Guard System	Tube (ETT)	
	Guara System	(K093126)	
Intended use	AnapnoGuard 100 Respiratory	The AnapnoGuard Endotracheal	
intended disc	Guard System is intended for	Tube is indicated for airway	
	airway management by	management by oral or nasal	
	oral/nasal intubation while	intubation of the trachea and for	
	providing continuous	evacuation or drainage of the	
	endotracheal cuff pressure	subglottic space.	
	control using non-invasive	suegreene spuce.	
	measurement and monitoring of		
	carbon dioxide concentration in		
	the subglottic space and		
	evacuation of secretions from		
	above the endotracheal tube's		
	cuff.		
Product Code	BSK	BTR	
Regulation No.	21 CFR 868.5750	21 CFR 868.5730	
Classification	Class II	Class II	
Supplied/use	Disposable (ETT portion)	Disposable	
Prescription	Prescription use	Prescription use	
use/OTC use			
Environment of	Hospitals, Intensive Care Units,	Same	
use	Mobile Intensive Care units and		
	Clinics.		
Intended users	Health care professionals	Same	
Intended	All ages, up to the appropriate	Same	
population	ETT size		
Biocompatibility	All materials are biocompatible	Same	
1 3	and compliant with ISO 10993-1		
Sterilization	ЕТО	ETO	
method			
Performance	ISO 5361	Same	
Standards			



Characteristics	Proposed AnapnoGuard 100 Respiratory Guard System	Hospitech Respiration AnapnoGuard Endotracheal Tube (ETT) (K093126)
Sizes (Input Diameter) [mm]	6.5, 7.0, 7.5, 8.0, 8.5, 9.0 mm	Same
Murphy's Eye	With or without	Same
Number of	4 of which 2 are combined into	Same
lumens (except	one suction lumen:	
main lumen)	1: suction x 2	
	2: Vent, rinsing, air sampling	
	3: Cuff inflation /deflation	
Suction lumens	Two suction lumens combined into one at the proximal end, outside the tube wall	Same
Tracheal tube maximum period	29 days	29 days
Reusable or disposable	Disposable	Disposable
Storage Environment	Ambient Temperature: -20° C to 40°C (-4°F to 104°F)	Same
	Pressure: 430 mmHg to 795 mmHg	
Operating environment	Ambient temperature: 0÷50°C (32°F - 122°F)	Same
	Humidity: 10÷80% non condensing Altitude: -1,250 feet to 15,000 feet	

The AnapnoGuard 100 Respiratory Guard System primary predicate device is the PYTON Cuff Pressure Regulator (K092733) for its cuff pressure control. It has similar intended use and technology as the cuff pressure control of the AnapnoGuard 100 Respiratory Guard System section. The AnapnoGuard 100's limits of presetting the target cuff pressure range are within the PYTON Cuff Pressure Regulator predicate device limits.

The AnapnoGuard 100 ETT is the same ETT that was cleared as Hospitech's AnapnoGuard Endotracheal Tube (ETT) K093126.



The Hospitech *AnapnoGuard 100 Respiratory Guard System* Cuff Pressure Monitor is as safe and as effective as the PYTON Cuff Pressure Regulator (K092733) and referenced to the Hamilton Cuff Pressure Regulator (IntelliCuff) (K103803. The *AnapnoGuard 100 Respiratory Guard System* cuff pressure unit has similar intended use and technological characteristics and is within the cuff pressure of these devices.

The AnapnoGuard 100 Respiratory Guard System suction unit is as safe and as effective as the K141255 SIMEX subglottic Aspiration System. The K141255 SIMEX subglottic Aspiration System predicate devices, has similar intended use and technology and is as safe and as effective as the AnapnoGuard 100 Respiratory Guard System regarding the suction power and the cyclical and automatic suctioning and it can define the length and the interval of the suction as it is done by the AnapnoGuard 100 Respiratory Guard System.

The vacuum pressure of the *AnapnoGuard 100 Respiratory Guard*System is within the vacuum pressure parameters of its predicate device.

Performance Standards:

AnapnoGuard 100 Respiratory Guard System complies with the following voluntary standards:

- IEC 60601-1:2005/EN 60601-1:2006 Medical Electrical Equipment Part 1, General requirements for basic safety and essential performance 3rd Edition
- IEC 60601-1-2:2007 (Electromagnetic compatibility (EMC)
- ISO 5361:2012 (Anesthetic and Respiratory Equipment Tracheal Tubes and Connectors)
- EN ISO 10993-1:2003 Biological Evaluation of Medical Devices
- ISO 14971:2007 Risk management for medical devices
- 60601-1-10:2014 General Requirements for Basic Safety and Essential Performance Collateral Standard: Requirements for



the Development of Physiologic Closed-Loop Controllers. (General II (ES/EMC))

Performance Bench Tests

The following bench performance testing was performed:

Name of test	Purpose
ETT:	Measure the cuff resting diameter.
Determination of Cuff Resting	_
Diameter	
ETT:	Validate that the tube doesn't cave in
Resistance to Tube Collapse	from inward cuff pressure
ETT:	Validate that the cuff does not herniate
Resistance to Cuff Herniation	the tube's airway.
ETT:	Validate the symmetry of the cuff.
Cuff Symmetry	
Suction Module:	Evaluate that the suction is safe.
Suction Safety Test	
Suction Module:	Validate the ability of the
Determination of	AnapnoGuard 100 system to perform
AnapnoGuard suction capacity	suction of the secretions according to
	the viscosity and rate of secretion
	production of the average patient.
Cuff pressure:	Validate the AnapnoGuard 100 design
Cuff Pressure Safety Test	in maintaining cuff pressures precision
	and safety boundaries
CO2 Analyzer:	Test the CO ₂ Sensor Precision.
CO ₂ Sensor Precision Test	
Cuff Pressure:	Compare the ability of the AG 100 to
Pressure Maintenance	maintain constant pressure in
Comparison (Tracoe)	comparison to the existing Tracoe
	Pressure Regulator
System:	Test the performance of the system
Integrated Performance Test	when operating in full spectrum using
	a patient simulator.
Physiological closed loop	Evaluate the physiological closed loop
	between the CO2 measurements and
	the suction control. This was done by
	bench testing and theoretical study in
	conformance to applicable clauses of
	60601-1-10



Bench testing demonstrated that the *AnapnoGuard 100 Respiratory Guard System* is as safe and as efficient for performing its intended use.

Preclinical Performance Data

The safety and feasibility of the *AnapnoGuard 100 Respiratory Guard System* were not evaluated by pre-clinical study.

Human factors/usability studies

A total of 45 professional team participants, the target population for operating the *AnapnoGuard 100 Respiratory Guard System*, were enrolled in the study.

The results of this usability study clearly indicate that User Manual and the Graphic Use Interface (GUI) of the *AnapnoGuard 100 Respiratory Guard System* are clear. The usability study demonstrated the safety and effectiveness use of the device, when operated by intended user's hospital professional team.

Summary of Clinical Performance Data:

Background

The clinical performance of the *AnapnoGuard 100 Respiratory Guard System* as airway management tool in mechanically ventilated patients was evaluated in prospective, two arms controlled and multi-center study.

Methods

The study included intensive care and post-operative patients expected to be mechanically ventilated for at least 12 hours. Following screening and enrollment, patients were randomized to study or control group.

Study group patients were intubated with the AnapnoGuard ETT and connected to the control unit of the *AnapnoGuard 100 Respiratory Guard System* operating in its full clinical mode, where the subglottic secretions suction and cuff pressure control was enabled (ON mode).



Control group patients were treated according to the current standard of care- patients were intubated with the AnapnoGuard ETT and connected to the control unit of the *AnapnoGuard 100 Respiratory Guard System* where the subglottic secretions suction was enabled but cuff pressure control was disabled (OFF mode). The cuff pressure in the control group was monitored manually according to standard of care in the ICU. In both groups, the presence of CO₂ levels above the cuff was measured by the AnapnoGuard 100 control unit.

The primary end point of the study was the overall duration and level of around ETT cuff leakage (determined by CO₂ Area under the Curve (AUC)). Secondary end points included number of cuff pressure measurements within the safety accepted range (24 to 40cmH₂O) and number of significant CO₂ leakage (readings at ≥2mmHg in the subglottic space). The non-inferiority hypothesis, compared to the standard of care use today was tested (by the primary endpoint). In addition, the performance safety of the *AnapnoGuard 100 Respiratory Guard System* system was evaluated by monitoring and recording device related adverse events.

Results

The average AUC of CO₂ leakage, calculated for the study group was significantly lower compare to control group (0.09±0.04 vs. 0.22±0.32 respectively, This result was found to be statistically significant (p<0.001). The significant reduction in CO₂ leakage in study group indicates the efficacy of the *AnapnoGuard 100 Respiratory Guard System* (while operating in full clinical mode) in optimizing cuff pressure, and the efficacy of *AnapnoGuard 100 Respiratory Guard System* as airway management tool.

Additional aspects of cuff pressure control during mechanical ventilation were:

- Number of cuff pressure measurements within the safety accepted range. Study result indicated that the normalized number of cuff pressure measurements within the safety range in the Study group more than twice the result of the control group (mean ratio Study / Control= 2.03, P<0.001).
- Measurements of significant leakages (CO₂) were significantly lower in Study group compare to control group



(0.056 vs. 0.642 respectively, Mean Ratio Study / Control=0.09, p<0.001).

Furthermore, no serious or device related adverse events were recorded throughout the study.

These findings further support the performance efficacy of the *AnapnoGuard 100 Respiratory Guard System* in optimizing cuff pressure and indicating its efficacy as airway management tool.

Conclusions

The *AnapnoGuard 100 Respiratory Guard System* was proven to meet the safety and effectiveness endpoints

Substantial equivalence conclusion

The performance tests and the clinical study that were conducted shows that the *AnapnoGuard 100 Respiratory Guard System* is as safe and effective as the listed predicate devices without raising any new questions of safety and efficacy.

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